

# Loan Application Form

**Members please note this completed loan application should be accompanied by copies of:**

- 3/6 months up to date bank statements
- 3 most recent payslips or social welfare payment slips
- If Self-Employed the last 2 years Notice of Self-Assessment, a Tax Clearance Certificate/Letter from an Account Confirming Tax Affairs are up-to-date and a Set of Business Accounts if available.
- Up to date ID & Address Verification
- Evidence of PPS Number
- Any other paperwork that will back up your application e.g. quotes/estimates, education fees etc.

**In the case of a loan in joint names information must be provided by both parties to the loan.**

**Loans greater than €20,000 may require further information e.g. Salary Certificate, Statement of Means etc.**

## Section 1: PERSONAL DETAILS

Account No.

### FIRST APPLICANT

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Present Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If less than 5 years please give previous address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Phone Details: \_\_\_\_\_

Email: \_\_\_\_\_

PPSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Visa ID: \_\_\_\_\_

Visa Expiry: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Number of Dependants: \_\_\_\_\_ Ages: \_\_\_\_\_

### SECOND APPLICANT *(where applicable)*

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Present Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If less than 5 years please give previous address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Phone Details: \_\_\_\_\_

Email: \_\_\_\_\_

PPSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Visa ID: \_\_\_\_\_

Visa Expiry: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Number of Dependants: \_\_\_\_\_ Ages: \_\_\_\_\_

## Section 2: LOAN DETAILS

Amount Applied for: \_\_\_\_\_  
Purpose of Loan: \_\_\_\_\_  
Repayment Amount: \_\_\_\_\_  
Repayment Frequency:  Weekly  Fortnightly  Monthly

## Section 3: ACCOMMODATION DETAILS

### FIRST APPLICANT

Home Owner  Renting  
 Living with Parents/Relatives  
 Other (please specify): \_\_\_\_\_

### SECOND APPLICANT *(where applicable)*

Home Owner  Renting  
 Living with Parents/Relatives  
 Other (please specify): \_\_\_\_\_

## Section 4: EMPLOYMENT DETAILS

### FIRST APPLICANT

Occupation: \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Employer Name: \_\_\_\_\_  
Employer Address: \_\_\_\_\_

Date Commenced Employment: \_\_\_\_\_

Employment Type: Permanent  Part-Time  Self-Employed   
Unemployed  Student  Retired   
Other  \_\_\_\_\_

#### If Self Employed

Business Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_

Business Description: \_\_\_\_\_

Year in Business: \_\_\_\_\_

Name of Accountant: \_\_\_\_\_

Accountant Address and Phone Number: \_\_\_\_\_

### SECOND APPLICANT *(where applicable)*

Occupation: \_\_\_\_\_  
Position Held: \_\_\_\_\_  
Employer Name: \_\_\_\_\_  
Employer Address: \_\_\_\_\_

Date Commenced Employment: \_\_\_\_\_

Employment Type: Permanent  Part-Time  Self-Employed   
Unemployed  Student  Retired   
Other  \_\_\_\_\_

#### If Self Employed

Business Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_

Business Description: \_\_\_\_\_

Year in Business: \_\_\_\_\_

Name of Accountant: \_\_\_\_\_

Accountant Address and Phone Number: \_\_\_\_\_

## Section 5: INCOME DETAILS

### FIRST APPLICANT

Gross Basic Income per annum € \_\_\_\_\_

Net Monthly Income € \_\_\_\_\_

Payment Frequency \_\_\_\_\_

Salary Payment Method \_\_\_\_\_

Children's Allowance \_\_\_\_\_

Social Welfare \_\_\_\_\_

Type of Payment \_\_\_\_\_

Length of Payment \_\_\_\_\_

Additional Income (if any) \_\_\_\_\_

Details \_\_\_\_\_

### SECOND APPLICANT *(where applicable)*

Gross Basic Income per annum € \_\_\_\_\_

Net Monthly Income € \_\_\_\_\_

Payment Frequency \_\_\_\_\_

Salary Payment Method \_\_\_\_\_

Children's Allowance \_\_\_\_\_

Social Welfare \_\_\_\_\_

Type of Payment \_\_\_\_\_

Length of Payment \_\_\_\_\_

Additional Income (if any) \_\_\_\_\_

Details \_\_\_\_\_

## Section 6: ONGOING COMMITMENTS

### FIRST APPLICANT

	Monthly Repayment Amount	Outstanding Balance	Provider
Rent/Mortgage	<input type="text"/>	<input type="text"/>	<input type="text"/>
Credit Card	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank Loan	<input type="text"/>	<input type="text"/>	<input type="text"/>
Car Loan/Lease	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Credit Union Loan	<input type="text"/>	<input type="text"/>	<input type="text"/>
Store Cards	<input type="text"/>	<input type="text"/>	<input type="text"/>
Store Finance	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Loans	<input type="text"/>	<input type="text"/>	<input type="text"/>

### FIRST APPLICANT

	Monthly Repayment Amount	Outstanding Balance	Provider
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Credit Card	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank Loan	<input type="text"/>	<input type="text"/>	<input type="text"/>
Car Loan/Lease	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Credit Union Loan	<input type="text"/>	<input type="text"/>	<input type="text"/>
Store Cards	<input type="text"/>	<input type="text"/>	<input type="text"/>
Store Finance	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Loans	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Section 7: SPOUSE/PARTNER DECLARATION

I hereby consent to my income and financial circumstances being considered for the purposes of the current Loan Application for....., although the application is not for myself, it is dependent on my income for repayment. I consent to Member First Credit Union checking my credit record with credit reference agency or agencies that are necessary to process this application, on the understanding this will show all loans that I have in my name with any other financial institution. I also understand that any information derived as a result of these credit checks will be used for the purpose of processing my spouse's/partner's loan application and therefore may be disclosed accordingly.

Signature: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_

Date: \_\_\_\_\_

## Section 8: PAYMENT PROTECTION INSURANCE\*

Would you like further information on PPI Yes  No

\* Payment protection insurance, or PPI, is insurance that will pay out a sum of money to help you cover your monthly repayments on your loans, if you are unable to work for certain reasons covered by your policy, such as death, illness or accident, or you become unemployed through no fault of your own.

## Section 9: DATA PROTECTION & DATA PRIVACY STATEMENT

The details provided in this application form together with any other information that is furnished to us in connection with this application will be retained and processed by Member First Credit Union Ltd. in accordance with our Data Privacy Statement. Please take time to read this document which is available to you at [www.mfcu.ie](http://www.mfcu.ie) or in any of our branches.

### IRISH CREDIT BUREAU (ICB)

#### NOTICE FROM IRISH CREDIT BUREAU D.A.C ('ICB')

As a result of the introduction of the General Data Protection Regulation ('GDPR'), from 25th May, 2018 ICB will be using Legitimate Interests (GDPR Article 6 (f)) as the legal basis for processing of your personal and credit information. These Legitimate Interests are promoting greater financial stability by supporting a full and accurate assessment of loan applications, aiding in the avoidance of over-indebtedness, assisting in lowering the cost of credit, complying with and supporting compliance with legal and regulatory requirements, enabling more consistent, faster decision-making in the provision of credit and assisting in fraud prevention.

Please review ICB's Fair Processing Notice which is available at <http://www.icb.ie/pdf/Fair Processing Notice.pdf>. It documents who they are, what they do, details of their Data Protection Officer, how they get the data, why they take it, what personal data they hold, what they do with it, how long they retain it, who they share it with, what entitles them to process the data (legitimate interests), what happens if your data is inaccurate and your rights i.e. right to information, right of access, right to complain, right to object, right to restrict, right to request erasure and right to request correction of your personal information.

### CENTRAL CREDIT REGISTER

#### IMPORTANT NOTICE

Under the Credit Reporting Act 2013 lenders are required to provide personal and credit information for credit applications and credit agreements of €500 and above to the Central Credit Register. This information will be held on the Central Credit Register and may be used by other lenders when making decisions on your credit applications and credit agreements. The Central Credit Register is owned and operated by the Central Bank of Ireland. For more information see [www.centralcreditregister.ie](http://www.centralcreditregister.ie)

## Section 10: DECLARATION

1. I/we are over 18 years of age.
2. That all statements made and particulars given to the Credit Union in connection with this loan application including all supporting information are strictly true to the best of my/our knowledge and belief. I am not indebted to any other Credit Union, bank or loan agency as a borrower or guarantor, except as stated above.
3. That the information provided accurately represents my/our financial situation.
4. I/we confirm that I/we have the financial means to repay this loan, and it will be used for the purpose outlined and that I/we will inform the Credit Union of any changes to my/our situation which might affect my/our financial situation.
5. I/we understand that my/our shares at loan issue will be held as security for this loan.

Signature of First Applicant: \_\_\_\_\_

Signature of Second Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

*(where applicable)*

Date: \_\_\_\_\_

## ADDITIONAL INFORMATION/ COMMENTS

<b>Notes</b>	<b>Loan Decision:</b> <b>Accept</b> <input type="checkbox"/> <b>Reject</b> <input type="checkbox"/>
	<b>Loans Officer:</b>
	<b>Loans Officer:</b>
	<b>Loans Officer:</b>
	<b>Date:</b>
<b>OFFICE USE ONLY: Date:</b>	<b>Outcome:</b>
<b>Credit Checks:</b> <b>ICB</b> <input type="checkbox"/> <b>CCR</b> <input type="checkbox"/>	<b>Signature:</b>

**Note:** For convenience, it may be necessary for the Credit Union to contact you via phone or text message. Please note the Credit Union maintains the right to contact you by such means as best available to it in relation to a non-performing loan or an outstanding debt to the Credit Union.

### WARNING

**IF YOU DO NOT MEET THE REPAYMENTS ON YOUR LOAN, YOUR ACCOUNT WILL GO INTO ARREARS. THIS MAY AFFECT YOUR CREDIT RATING, WHICH MAY LIMIT YOUR ABILITY TO ACCESS CREDIT IN THE FUTURE.**

### Head Office

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www.mfcu.ie

**Member First**  
CREDIT UNION



[www.mfcu.ie](http://www.mfcu.ie)

Member First Credit Union Limited is regulated by the Central Bank of Ireland.